

AM9-99-0134
09/556,303

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Ruvolo et al.

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Serial No.: 09/556,303

Group Art Unit: 3623

DEC 08 2004

Filed: 4/24/2000

Examiner: Susanna M. Diaz

Title: *System and Method for Matching Entities Utilizing an Electronic Calendaring System*

AMENDMENT AFTER FINAL

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the outstanding office action of 10/21/2004, and further in view of the examiner interview of 11/10/2004, please amend the above-identified application as follows:

**LACASSE & ASSOCIATES**

PROFESSIONAL PATENT SERVICES

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FACSIMILE TRANSMITTAL SHEET**DATE SENT:** December 8, 2004**DELIVER TO:**

Name: Examiner Susanna Diaz
Company: USPTO / GAU 3623
Phone No: 703-305-1337
Fax No: 703-872-9306

FROM: **Jaclyn A. Schade / Randy W. Lacasse****YOUR FILE:** **USSN 09/556,303**

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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/556,303	
	Filing Date	4/24/2000	
	First Named Inventor	Ruvolo et al.	
	Art Unit	3623	
	Examiner Name	S. DIAZ	
Total Number of Pages in This Submission	19	Attorney Docket Number	AM9-99-0134

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Lacasse & Associates, LLC	
Signature		
Printed Name	Randy W. Lacasse	
Date	December 8, 2004	Reg. No. 34,368

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In the Drawings:

None

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In the Specification:

None